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(to be used for all correspondence after initial filing) Total Number of Pages in This Submission				Art Unit Examiner Name Attorney Docket Number	2614 Michael Le	;		
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Fee Transmittal Form Fee Attached Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request				Address	After Allowance Communication to TC Appeal Communication to Board of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below):			
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Signature Printed name	Allen LeRoy Limberg Mature Allen Jekny Implery							
Date May 18, 2006			Reg. No. 27,21					
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Fees pursuant to the consolidated of	propriations Act, 2005 (H.R.	4818).	Application Numb	er 0	9/757,019	
FEE TRAI	NSMITTA	L	Filing Date	J	anuary 9, 2001	
	/ 2006		First Named Inver	ntor L	IMBERG, Allen Le f	Roy
			Examiner Name	L	EE, Michael	
Applicant claims small entity	status. See 37 CFR 1.27		Art Unit		2614	
TOTAL AMOUNT OF PAYMENT	(\$) 200		Attorney Docket N	VO. A	ALRL12	
METHOD OF PAYMENT (che	ck all that apply)					
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1. BASIC FILING, SEARCH, AND EXAMINATION FEES						
FIL	ING FEES Small Entity	SEAF	RCH FEES Small Entity	EXAMI	NATION FEES Small Entity	
Application Type Fee	(\$) <u>Fee (\$)</u>	Fee (\$		<u>Fee (\$</u>		Fees Paid (\$)
Utility 30	0 150	500	250	200	100	
Design 20	0 100	100	50	130	65	
Plant 20	0 100	300	150	160	80	
Reissue 30	0 150	500	250	600	300	
Provisional 20	0 100	0	0	0	0	
2. EXCESS CLAIM FEES						nall Entity Fee (\$)
<u>Fee Description</u> Each claim over 20 (includ	ing Reissues)	•			50	25
	Each independent claim over 3 (including Reissues) 200					
Multiple dependent claims					360	180
	Claims Fee (\$)	<u>Fe</u>	e Paid (\$)		Multiple Depe	
	naid for if greater than 20		0		<u>Fee (\$)</u>	Fee Paid (\$)
HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)						
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3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer						
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sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets						
4. OTHER FEE(S) Non-English Specification		entity			,	Fees Paid (\$)

SUBMITTED BY			
Signature	Allen Leky Limberg	Registration No. (Attorney/Agent) 27,211	Telephone (941)-624-4302
Name (Print/Type)	Allen LeRoy Limberg		Date May 18, 2006

Other (e.g., late filing surcharge):

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